



Board of Behavioral Sciences
 1625 North Market Blvd., Suite S200, Sacramento, CA 95834
 Telephone: (916) 574-7830 TTY: (800) 326-2297
www.bbs.ca.gov



RETIRED LICENSE APPLICATION

For Office Use Only:

Cashiering No

APPROPRIATE FEE OF \$40.00 MUST ACCOMPANY THIS FORM

Make check payable to - Behavioral Sciences Fund

(Please type or print clearly in ink)

1. Legal Name*		Last	First	Middle
2. Address of Record**:				
Number and Street				
City		State		Zip Code
3. Business Telephone:	4. Residence Telephone:		5. E-Mail Address:	
6. Birth Date: mm/dd/yyyy	7. Social Security Number***:	8. License Type:	9. License Number:	

Business and Professions Code Sections 4984.41, 4989.45, 4997.1, 4999.113 states, in part:

1. A holder of a retired license may not engage in any activity for which an active license issued by the Board of Behavioral Sciences is required.
2. In order to be eligible for a retired license, an individual's license must be current and active, or capable of being renewed, and the license must not be suspended, revoked or otherwise punitively restricted by the Board of Behavioral Sciences or subject to disciplinary action by the Board.
3. A holder of a retired license shall not be required to renew that license.
4. If a retired license was issued less than five years prior to the date of the initial retired application, the licensee may apply to restore the license to active status, if all the fingerprint, renewal fees and continuing education requirements are met..

I certify that I have read and understand the information contained on this form and I declare under penalty of perjury under the laws of the State of California that all the information submitted on this form and on any accompanying attachments is true and correct.

Signature of Applicant: _____

Date: _____

Continued on next page.

**IMPORTANT
PLEASE READ CAREFULLY**

Business and Professions Code Sections 4984.41, 4984.41, 4989.45, 4997.1 and 4999.113 states, in part:

(g) The holder of a retired license may apply to restore to active status his or her license to practice if that retired license was issued five or more years prior to the application date, and the applicant meets all of the following requirements:

- (1) Has not committed an act or crime constituting grounds for denial of licensure.
- (2) Applies for licensure and pays the fee required by this chapter.
- (3) Passes the examinations required for licensure.
- (4) Complies with the fingerprint submission requirements established by the board in regulation.

*Business and Professions Code sections 4982(b), 4989.54 (b), 4992.3 (b) and 4999.90 (b) gives the board the right to refuse to issue any registration or license, or may suspend or revoke the license or registration of any registrant or licensee if the applicant secures the license or registration by fraud, deceit, or misrepresentation on any application for licensure or registration submitted to the board.

**The address you enter on this application is public information and will be placed on the Internet pursuant to Business and Professions Code section 27. If you do not want your home or work address available to the public, please provide an alternate mailing address such as a PO Box.

***Disclosure of your social security number is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 (42 USCA 405 (c) (2) (c)) authorizes collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Section 17520 of the Family Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your social security number, your application for initial or renewal license will not be processed AND you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.